Financial Status Report

Short Form

Standard Form SF-269A

Federal Agency and Organizational Element to Which Report is submitted:		2. Federal Grant or Other Identifying Number Assigned by Federal Agency	
3. Recipient Organization	n (Name and complete add	lress, including ZIP code)	
4. Employer	5. Recipient Account Number or Identifying	6. Final Report	7. Basis
Identification Number	Number	☐ Yes ☐ No	☐ Cash ☐ Accrual
8. Funding/Grant Period From: (Month, Day,		9. Period Covered by Report From: (Month, Day,	
Year)	To: (Month, Day, Year)	Year)	To: (Month, Day, Year)
10. Transactions	I Previously Reported	II This Period	III Cumulative
a. Total outlays			
b. Recipient share of outlays			
c. Federal share of outlays			
d. Total unliquidated obligations			
e. Recipient share of unliquidated obligations			
f. Federal share of unliquidated obligations			
g. Total federal share (sum of lines c and f)			
h. Total federal funds authorized for this funding period			
i. Unobligated balance			

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of federal funds (Line h minus line g)					
11. Indirect Expense					
a. Type of Rate (<i>Place "X" in appropriate box</i>) Provisional Predetermined Final Fixed					
b. Rate	c. Base	d. Total Amount	e. Federal Share		
sponsoring agency in con	npliance with governing le	·	V		
13. Certification:	I certify to the best of my knowledge and belief that this report is correct and complete and that all outlays and unliquidated obligations are for the purposes set forth in the awards documents.				
Name and Title			Telephone (Area code, number and extension)		

This information will be submitted to the Grants Management Division

Send Data

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